



California University Preparatory School

Accredited by AI, NCPA & MSA-CESS

18760 E. Colima Road, Rowland Heights, CA 91748 U.S.A.

Tel: 626-964-9655 Fax: 626-913-3919

- a. Please note this application is for both soon-to-be enrolled and previously enrolled students.
- b. The application only needs to be filled out once at the beginning of a student's Cal U Prep School career.

Application Procedure

Step 1 - Submit Completed Application, Required Items, and Fees

The Application Form is available on our website or from any of the admissions counselors via email or hard-copy. It must be submitted along with all required items, including:

1. *Completed Application Form (with Signature)
2. *Photocopy of passport information page
3. *Official original transcripts, sealed with English translation, from all grades completed
4. *Application fee
5. Photocopy of immunization record and report of health examination, completed by a physician
6. completed affidavit and parents' authorization (if student will not live with natural parents in the US)
7. Two (2) letters of recommendation
8. Affidavit of financial support or statement to show proof that the student has sufficient financial resources to pay for tuition and living expenses for one year
9. Transfer request form (if student is transferring from another school)

Step 2 - Interview

After your application and all required items are submitted, an admissions counselor will contact you to schedule an interview. The interview may be conducted by phone if the student is not local.

Step 3 - Acceptance and Payment Notice

If the student is admitted to California University Preparatory School, an admissions counselor will send you a notice of acceptance and a payment notice for the following:

- Tuition
- Academic Fee
- Enrollment fee
- Activities and Field Trip fee
- SEVIS I-901 fee
- Textbook fee

For detailed information about school fees, please refer to CUPS' Fee Schedule

The SEVIS I-901 fee, the CUPS' \$1,000 service fee, and the delivery fee are each non-refundable under any circumstances. Students holding a visa and attempting to change their visa status to Nonimmigrant Alien Students Status **will not receive any refund**, even if the change of status is denied. The enrollment fee, academic fee, activities and field trip fee and tuition are refundable ONLY to a first-time Nonimmigrant Alien Students applicant living outside the United States and ONLY if the student is denied an Nonimmigrant Alien Students visa by the U. S Government. In the case of any "force majeure", all fees paid to California University Preparatory School are not refundable.

Step 4 - Enrollment Package

When all required payments are received in full, your admissions counselor will send you a letter of acceptance and Nonimmigrant Alien Students Form necessary to obtain a Nonimmigrant Alien Students visa to enter the United States.

Step 5 – Visa Interview

It is the student or agent's responsibility to schedule a visa interview with the U.S. consulate in his/her home country. The most accurate information for the visa interview process can be found through the U. S. consulate in your home country.



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Student Application

Student Information

Legal Name of Student:

Family Name

First Name

Middle Name

Other Name

Date of Birth: / /

MM / DD / YYYY

City and country of Birth:

City

Country

Country of Citizenship:

Passport Number:

When do you plan to enroll? / /

MM / DD / YYYY

Have you ever lived in the United States? NO YES If so, How long?

What is/are your native language(s)?

What is your legal status in the United States?

- F-1 International Student U S. Citizen L-2/E-2/H-4 student
 F-1 Transfer Student U. S. Permanent Resident
 Other:

Whom does the student plan to live with during his/her time at California University Preparatory School?

(Please check all that apply)

- Mother Father Stepmother Stepfather

If the student will not live with any of the above, the student must stay with one of following. Please select one:

- Parent-appointed guardian (caregiver authorization form must be signed)
 Homestay arranged by California University Preparatory School(homestay application form must be filled out and is available upon request)



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Student's Educational Information

Please list all of the schools attended in the past three years:

1.

School Name _____ Phone Number _____

Address: Number and Street _____

City _____ State/Province _____ Country _____

Highest Grade Completed _____ Reason for leaving _____

Please list all of the schools attended in the past three years:

2.

School Name _____ Phone Number _____

Address: Number and Street _____

City _____ State/Province _____ Country _____

Highest Grade Completed _____ Reason for leaving _____

Please list all of the schools attended in the past three years:

3.

School Name _____ Phone Number _____

Address: Number and Street _____

City _____ State/Province _____ Country _____

Highest Grade Completed _____ Reason for leaving _____

Has the student ever repeated a grade? NO YES If so, Please explain:

Has the student ever skipped a grade? NO YES If so, Please explain:

Has the student ever been suspended or expelled? NO YES If so, Please explain:

Does the student have any circumstances, issues, or concerns, academic, social, health-related, or otherwise, that the school should be aware of? NO YES If so, Please explain:



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Parent Information

Parents are: Married Separated Divorced Widowed Single

Father

Family Name	First Name	Middle Name	Other Name
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Home Address:

Street Name and Number	Apt.	Floor
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District/City	State/Province	Postal Code	Country
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Home Phone:	Fax:
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Work Phone:	Cell:
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Email:

Business Name:

Occupation:

Company Address:

Street Name and Number	Apt.	Floor
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District/City	State/Province	Postal Code	Country
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Mother

Family Name	First Name	Middle Name	Other Name
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Home Address:

Street Name and Number	Apt.	Floor
------------------------	------	-------

District/City	State/Province	Postal Code	Country
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Home Phone:	Fax:
-------------	------

Work Phone:	Cell:
-------------	-------

Email:

Business Name:

Occupation:

Company Address:

Street Name and Number	Apt.	Floor
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District/City	State/Province	Postal Code	Country
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Agreement and Authorization

This agreement and authorization serve as a fundamental understanding of California University Preparatory School's policies and regulations. It must be signed by parents and students to complete the enrollment process. Please read the following statements carefully and completely, and complete all fields as necessary.

Tuition and Fees Statement

The student's application will not be processed until all required items are received, including application fee. These fees are **nonrefundable**, even if the student is not admitted to California University Preparatory School.

Upon acceptance, a Nonimmigrant Alien Students Form will not be issued until all additional fees are received in full, including all of the following.

- Tuition
- Academic fee
- Enrollment fee
- Activities and Field Trip fee
- SEVIS I-901 fee
- Textbook fee

For detailed information about school fees, please refer to CUPS' Fee Schedule

The SEVIS I-901 fee, the CUPS' \$1,000 service fee, and the delivery fee are each non-refundable under any circumstances. Student transferring from another American school to Cal U Prep School **will not receive a refund under any circumstance.** Students holding a visa and attempting to change their visa status to F-1 will not receive any refund, even if the change of status is denied. The enrollment fee, academic fee, activities and field trip fee and tuition are refundable **ONLY to a first-time (at California University Preparatory School) Nonimmigrant Alien Students applicant living outside the United States and ONLY if the student is denied an Nonimmigrant Alien Students visa by the U. S Government. The fee refund will be processed ONLY IF the student surrenders to California University Preparatory School (1) the original Nonimmigrant Alien Students form, (2) the U.S. Government's rejection letter, and (3) a copy of the passport page(s) containing application stamp(s) from the U.S. government. The beneficiary will allow 60 days for the refund to be processed.**

No part of the tuition or fees will be refunded if the student fails to start school as scheduled or if the student is expelled, withdraws, or is suspended during the school year. Furthermore, in the case of any "force majeure" event it is materially hampered in the performance of its obligations or its normal business operation are delayed or become impossible or commercially impracticable: acts of God, catastrophe, labor disagreement, acts of government, its agencies or officers, an order, regulation, ruling or action of any labor union or association of employees affecting California University Preparatory School or the industry in which it is engaged, delays in the delivery of materials or supplies or any other cause beyond California University Preparatory School's control. All fees paid to California University Preparatory School are not refundable.

Statement of Truth

My signature below certifies that the information provided in all parts of this application is true and correct to the best of my knowledge. If I am admitted, I agree to cooperate with California University Preparatory School officials and conduct myself in accordance with the ideals and regulations of California University Preparatory School.

Student's Name(Print): _____ Date of Birth: / /

MM DD YYYY

Signature of Student: _____ Date: _____

Parent's or Guardian's Name (Print): _____

Signature of Parent or Guardian: _____ Date: _____



Photograph Usage Release Agreement

The parent and student authorize and irrevocably grant California University Preparatory School and its associates, affiliates, appointed advertising agencies and designated directors, officers, agents, employees, and customers, permission to use photographs and likenesses of myself in all forms of media, for any and all promotional purpose including advertising, publicity, display, commercial, or editorial use.

Emergency Medical/Dental Care Consent

By signing this agreement, the parent represents and warrants that he/she is the parent or guardian responsible for the care and welfare of the student named above. The parent represents and warrants that said student has a comprehensive policy of insurance for all expenses related to illnesses and injuries. California University Preparatory School requires that all students be covered by accidental injury and illness insurance.

The parent hereby agrees to allow the child to fully participate in all activities organized by California University Preparatory School, including field trips, sports, community service, and others. The parent and child waive all claims against the California University Preparatory School, leaders of the activities and the officers, agents, representatives, authorized caregivers, and homestay families of California University Preparatory School arising out of participation in such activities.

The parent hereby authorizes the School, its officers, agents, employees, volunteers, caregivers, homestay families, and any emergency service agency as well as any physician, dentist, or paramedic associated with them to give whatever care, in their professional opinion, is necessary for said student's health and safety while enrolled at California University Preparatory School. The school is hereby authorized to administer first aid and over-the-counter medications unless I have otherwise directed medication.

The parent hereby accepts full responsibility for any costs incurred in providing medical care to the student and agrees to hold the school, its officers, agents, employees, volunteers, caregivers, and homestay families harmless. The parent agrees to pay or reimburse the school for all expenses in connection with the above.

The parent hereby waives all claims against the school, its officers, agents, employees, volunteers, caregivers, and homestay families for any and all accidents, illness, injury, or death occurring at the school or during any and all of its activities, including field trips, sports, community service, and any other activities organized by the school.

All declarations in this Agreement are true and correct until revoked by written notification to California University Preparatory School.

Student's Name(Print): _____ Date of Birth: / /
MM DD YYYY

Signature of Student: _____ Date: _____

Parent's or Guardian's Name(Print): _____

Signature of Parent or Guardian: _____ Date: _____



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Acknowledgment by Notary Public

State of California
Country of Los Angeles

On this date, _____, before me, _____,
a Notary Public, personally appeared _____,

Who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they signature(s) on the instrument the person(s), or the entity upon behalf the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the state of California that the foregoing paragraph is true and correct.

Witness my hand and official seal

Notary Public

Consent for Going Off-Campus

California University Preparatory School allows 11th-12th grade students to leave campus to have lunch on their own under certain circumstances. California University Preparatory School is not responsible for the students' safety or conduct if they leave the school property at any time during school hours and therefore; California University Preparatory School will not cover any losses, injuries or damages caused by or resulting from a student being off campus. In addition, California University Preparatory School does not assume any responsibility if a student enters his/her own car or another student's car at any time. If any California University Preparatory School Policy is not upheld the student may lose this privilege and other disciplinary consequences may be imposed. It is important that the student has his/her identification with him/her at all times.

It is my request that _____ (your student's name) be allowed to leave campus during the open lunch period. I agree and accept full responsibility for any off-campus activity and understand that it may be revoked and other consequences imposed if my student does not adhere California University Preparatory School policies.

By signing your name you indicate that you agree and consent to the policy above.

Consent for California University Preparatory School Fieldtrips

I, the legal guardian/parent of student named _____ agree to allow the said student to participate in any school-sponsored fieldtrips. I also agree to release and indemnify California University Preparatory School. I from all claims of injury or loss to the student (asserted either by me or the student) arising from the student's participation in any trips.

By signing your name you indicate that you agree and consent to the statement above.

Student Handbook

All students will receive a **Student Handbook**. All students **MUST** read and follow the handbook. Not following the handbook will result suspension, expulsion, and losing student status.

If the students do not follow the handbook, further actions or a contract will be put in force.

By signing below, I indicate that I have read, understand, and accept all of the terms and conditions written in this application. This Agreement expresses the complete understanding of the parties. The parent/guardian indicated below has the legal right to consent to and does consent to all of the terms and conditions listed in all parts of this Agreement.

Student's Name(Print): _____ Date of Birth: / / _____
MM DD YYYY

Signature of Student: _____ Date: _____

Parent's or Guardian's Name (Print): _____

Signature of Parent or Guardian: _____ Date: _____



Grade Placement Agreement

All official transcripts from middle school to the most recent high school submitted with the application are final. Any transcripts submitted afterwards with different grades or classes will not be accepted. If the student is currently taking classes at another school, he/she must provide California University Preparatory School with a written list of these ongoing classes upon submitting the application.

It is **mandatory** for each incoming student to take a Math and English placement test prior to enrollment. Test dates are available in the Administrative Office. **California University Preparatory School will designate the student's grade level based on the test results in conjunction with the student transcripts and the University of California A-G required course list.** Based on the results of the placement test, the student may be placed in a lower grade level than what he/she may have completed prior to **California University Preparatory School.**

If the student is unable to demonstrate basic English proficiency based on the English placement test, he/she will be required to take ELD courses. ELD courses are part of the regular course load and may be taken for credit as electives.

Students are not allowed to take the placement test if official transcripts from middle school to the last completed grade are not received by the Administrative Office. No classes will be scheduled until the placement test is completed. Failure to take the placement test will result in delayed enrollment.

California University Preparatory School **requires** students to take the TOEFL (iBT) test within two months of enrollment. TOEFL (iBT) is a test of English proficiency for international students and public/private universities require it.

Currently, the University of California (UC) system requires a minimum of 81 for admission; the California State University (CSU) system requires a minimum of 61 for admission; and the two-year junior or Community College (CC) system requires a minimum of 45 for admission. Additional private schools such as Stanford generally range from 80 to 105.

In order for an ELD student to transition into the mainstream curriculum for the following semester, the student must obtain a minimum TOEFL (iBT) score of 35 if he/she is in 9th grade, 40 if he/she is in 10th grade, and 45 if he/she is in 11th grade.

Seniors are expected to graduate from California University Preparatory School with a minimum TOEFL (iBT) score of 61. After official TOEFL (iBT) scores are received, parents or caregivers may meet with the Academic Office to discuss the student's English proficiency and academic goals.

Enrollment in California University Preparatory School does not guarantee conferral of a diploma. The student must pass all courses with a grade of 70% (C) or above, based on the University of California A-G required course list. The student must also adhere to all other rules and regulations and fulfill all requirements for graduation from Cal U Prep School.



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Medical and Health Statement

Student's Name:

Date of Birth: / /

Family Name

First Name

MM DD YYYY

Please complete the following as fully and accurately as possible. Please check if any of these conditions exist. Please provide details in the space provided.

This will NOT affect the consideration of your student's application.

Present medical treatments

Allergies or reactions to medication

Serious physical impairment or illness

Physical handicaps

Restrictions on physical activity or participation in sports

Restrictions on diet (food or drink)

Vision deficiency

Hearing deficiency

Other

Immunization Record and Health Examination Report

Please have a physician complete the attached Report of Immunization for School Entry. Please also submit a photocopy of immunization records for the following vaccines and tests, with each dose dated.

- Polio
- DTP (Diphtheria, Tetanus, Pertussis)
- MMR (Measles, Mumps, Rubella)
- Hepatitis B
- Varicella (Chickenpox)
- TB skin test result
- Written evidence of chest X-ray (if TB test result is positive)



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Department of Health Services
Children's Medical Services Branch
Child Health and Disability Prevention (CHDP) Program

State of California—Health and Human Services Agency
Primary Care and Family Health Division

REPORT OF HEALTH EXAMINATION FOR SCHOOL ENTRY

To protect the health of children, California law requires a health examination on school entry. Please have this report filled out by a health examiner and return it to the school. The school will keep and maintain it as confidential information.

PART I TO BE FILLED OUT BY A PARENT OR GUARDIAN

CHILD'S NAME—Last _____ First _____ Middle _____ BIRTHDATE—Month/Day/Year _____

ADDRESS—Number/Street _____ City _____ State _____ ZIP Code _____ SCHOOL _____

PART II TO BE FILLED OUT BY HEALTH EXAMINER

HEALTH EXAMINATION

NOTE: All tests and evaluations except the blood lead test must be done after the child is 4 years and 3 months of age.

REQUIRED TESTS/EVALUATIONS	DATE
Health History	
Physical Examination	
Dental Assessment	
Nutritional Assessment	
Developmental Assessment	
Vision Screening	
Audiometric (hearing) Screening	
Tuberculin Test (Mantoux/PPD)	
Blood Test (for anemia)	
Urine Test	
Blood Lead Test	
Other	

IMMUNIZATION RECORD

Note to Examiner: Please give the family a completed or updated yellow California Immunization Record.
Note to School: Please record immunization dates on the blue California School Immunization Record (PM 286).

VACCINE	DATE EACH DOSE WAS GIVEN				
	First	Second	Third	Fourth	Fifth
POLIO (OPV or IPV)					
DTaP/DTP/DITd (diphtheria, tetanus, and [acellular] pertussis) OR (tetanus and diphtheria only)					
MMR (measles, mumps, and rubella)					
HIB MENINGITIS (Haemophilus influenzae B) (Required for child care/preschool only)					
HEPATITIS B					
VARICELLA (Chickenpox)					

PART III ADDITIONAL INFORMATION FROM HEALTH EXAMINER (optional)

RESULTS AND RECOMMENDATIONS

Fill out if patient or guardian has signed the release of health information.

- Examination shows no condition of concern to school program activities.
- Conditions found in the examination or after further evaluation that are of importance to schooling or physical activity are: (please explain)

RELEASE OF HEALTH INFORMATION BY PARENT OR GUARDIAN

I give permission for the health examiner to share the additional information about the health check-up with the school as explained in Part III.

- Please check this box if you **do not** want the health examiner to fill out Part III.

Signature of parent or guardian _____ Date _____

Name, address, and telephone number of health examiner _____

Signature of health examiner _____ Date _____

If your child is unable to get the school health check-up, call the Child Health and Disability Prevention (CHDP) Program in your local health department. If you do not want your child to have a health check-up, you may sign the waiver form (PM 171 B) found at your child's school.